must be available and of a quality that assures that films will not be damaged or lost.

F. Learning Resources

A wide range of printed materials, instructional aids, and equipment must be available to support instruction. Current specialized reference texts should be provided; and models, replicas, slides, and films which depict current techniques should be available for use in instruction. As appropriate self-instructional materials become available, they should be provided for the student’s use.

NOTE: Educational programs accredited by an organization recognized by the United States Department of Education are considered to have met these standards.

APPENDIX D TO PART 75—STANDARDS FOR ACCREDITATION OF EDUCATIONAL PROGRAMS FOR NUCLEAR MEDICINE TECHNOLOGISTS

A. Sponsorship

1. Accreditation will be granted to the institution that assumes primary responsibility for curriculum planning and selection of course content; coordinates classroom teaching and supervised clinical education; appoints faculty to the program; receives and processes applications for admission; and grants the degree or certificate documenting completion of the program.

2. Educational programs may be established in:
   (a) Community and junior colleges, senior colleges, and universities;
   (b) Hospitals and clinics;
   (c) Laboratories;
   (d) Medical schools;
   (e) Postsecondary vocational/technical schools and institutions; and
   (f) Other acceptable institutions which meet comparable standards.

3. The sponsoring institution and affiliate(s) must be accredited by a recognized agency. When the sponsoring institution and affiliate(s) are not so recognized, they may be considered as meeting the requirements of accreditation if the institution meets or exceeds established equivalent standards.

4. Responsibilities of the sponsor and each affiliate for program administration, instruction, supervision, etc., must be carefully described in written affiliation agreements.

B. Curriculum

Instruction must follow a plan which documents:

1. A structured curriculum including clinical education with clearly written syllabi which describe learning objectives and competencies to be achieved. The curriculum shall be based on not less than one calendar year of full-time study or its equivalent.

2. The minimum professional curriculum that includes the following:
   (a) Methods of patient care;
   (b) Radiation safety and protection;
   (c) Nuclear medicine physics;
   (d) Radiation physics;
   (e) Nuclear instrumentation;
   (f) Statistics;
   (g) Radionuclide chemistry;
   (h) Radiopharmacology;
   (i) Departmental organization and function;
   (j) Radiation biology;
   (k) Nuclear medicine in vivo and in vitro procedures;
   (l) Radionuclide therapy;
   (m) Computer applications; and
   (n) Clinical practicum.

3. Assignment of appropriate instructional materials.

4. Classroom presentations, discussions, and demonstrations.

5. Supervised practice, experience, and discussions. This shall include the following:
   (a) Patient care and patient recordkeeping;
   (b) Participation in the quality assurance program;
   (c) The preparation, calculation, identification, administration, and disposal of radiopharmaceuticals;
   (d) Radiation safety techniques that will minimize radiation exposure to the patient, public, fellow workers, and self;
   (e) The performance of an adequate number and variety of imaging and non-imaging procedures; and
   (f) Clinical correlation of nuclear medicine procedures.

6. Evaluation of student’s knowledge, problem-solving skills, and motor and clinical competencies.

7. The competencies necessary for graduation.

C. Resources

1. The program must have qualified program officials. Primary responsibilities shall include program development, organization, administration, evaluation, and revision. The following program officials must be identified:
   (a) Program Director—(1) Responsibilities. The program director of the educational program shall have overall responsibility for the organization, administration, periodic review, continued development, and general effectiveness of the program. The director shall provide supervision and coordination to the instructional staff in the academic and clinical phases of the program. Regular visits to the affiliates by the program director must be scheduled.
   (2) Qualifications. The program director must be a physician or nuclear medicine technologist. The program director must
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Instructional Staff—(a) Responsibilities. The instructional staff shall be responsible for instruction in the didactic and/or clinical phases of the program. They shall submit course outlines for each course assigned by the program director; evaluate students and report progress as required by the sponsoring institution; and cooperate with the program director in the periodic review and upgrading of course material.

(b) Qualifications. The instructors must be qualified, knowledgeable, and effective in teaching the subjects assigned.

(c) Instructor-to-student ratio. The instructor-to-student ratio shall be adequate to achieve the stated objectives of the curriculum.

(d) Professional development. Accredited programs shall assure continuing education in the health profession or occupation and ongoing instruction for the faculty in curriculum design and teaching techniques.

3. Financial resources for continued operation of the educational program must be assured.

4. Physical Resources. (a) General. Adequate classrooms, laboratories, and other facilities shall be provided.

(b) Equipment and Supplies. Modern nuclear medicine equipment, accurately calibrated, in working order, and meeting applicable Federal and State standards, if any, must be available for the full range of diagnostic and therapeutic procedures as outlined in the curriculum.

(c) Reference Materials. Reference materials appropriate to the curriculum shall be readily accessible to students.

(d) Records. Records shall be maintained as dictated by good educational practices.

5. Instructional Resources. Instructional aids such as clinical materials, reference materials, demonstration and other multimedia materials must be provided.

D. Students

ADMISSION REQUIREMENTS

Persons admitted into nuclear medicine technology programs shall have completed postsecondary courses in the following areas:

1. Human anatomy and physiology;
2. Physics;
3. Mathematics;
4. Medical terminology;
5. Oral and written communications;
6. General chemistry; and
7. Medical ethics.

Prerequisites may be completed during nuclear medicine training. Educational institutions such as junior colleges, universities, and technical vocational institutes may provide these prerequisite courses as part of an integrated program in nuclear medicine technology (i.e., two to four years).

E. Operational Policies

Students may not take the responsibility nor the place of qualified staff. However, students may be permitted to perform procedures after demonstrating proficiency, with careful supervision.

F. Continuing Program Evaluation

1. Periodic and systematic review of the program’s effectiveness must be documented.  
2. One element of program evaluation shall be the initial employment of graduates of the program.

NOTE: Educational programs accredited by an organization recognized by the United States Department of Education are considered to have met these standards.

APPENDIX E TO PART 75—STANDARDS FOR ACCREDITATION OF EDUCATIONAL PROGRAMS FOR RADIATION THERAPY TECHNOLOGISTS

A. Sponsorship

1. Educational programs may be established in:

(a) Community and junior colleges, senior colleges, and universities;

(b) Hospitals, clinics, or autonomous radiation oncology centers meeting the criteria for major cancer management centers or meeting demonstrably equivalent standards;

(c) Medical schools; and

(d) Postsecondary vocational/technical schools and institutions.

2. The sponsoring institution and affiliates, if any, must be accredited by recognized agencies or meet equivalent standards. When more than one clinical education center is